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## Editorials

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IRVINE H. PAGE, M.D., Editor

### More on a National Academy of Medicine

Last year I wrote of the need for a National Academy of Medicine. It has become increasingly apparent that a large gap exists between the thinking and operations of the American Medical Association on the one hand and the various governmental medical agencies on the other. For example, there seems to be little middle ground between the AMA and the President's Science Advisory Committee with its minimum of physician representation. The recent Commission on Heart Disease, Cancer and Stroke again illustrates how wide is the gap, and yet no serious-minded person denies the great role that medicine must play if we plan to have a "Great Society."

So what has happened since the original editorial (Needed—National Academy of Medicine, MM, July 20, 1964, p. 77)? Hundreds of letters have arrived expressing all manner of opinions, and many of them have been from present members of the National Academy of Science. I am deeply impressed by their thoughtfulness and desire to find the right answer. A summary of all these letters is impossible because of their great variety. One trend, however, is readily discernible, and it is that there is the need. On a less urgent note is the feeling that formation of an Academy will not be easy. This, in short, is the distillate of the thinking of many highly intelligent scientists and physicians. While all this was under way, the engineers, for a variety of not wholly dissimilar reasons, have formed a National Academy of Engineers. Thus, change seems to be in the air.

Let me add a series of miscellaneous views and suggestions I have gleaned from the correspondence, especially from present members of the NAS. Clearly medicine is wholly inadequately represented in the

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NAS, although other disciplines feel it is they who are inadequately represented. Oddly enough, biochemistry feels slighted! Some feel a NAM should be closely affiliated with the NAS; others feel strongly against it, and yet only four suggested that the problem be explored in collaboration with the NAS! Many express the hope that a NAM would comprehend social issues which seem to find no reflection in the NAS. The fear is often expressed that academies in general "are no more than self-perpetuating bodies to serve our own glory"; and more, "It is a great honor to be a member of . . . and the main function of it is to decide who deserves the honor." Isn't it good to see that our brethren have not lost their delightful sense of humor! Another fear is that it would fall into the hands of cliques of medical politicians. With delight I read the following: "The multiplicity of organizations has already done almost infinite harm so that on first blush I shuddered at a NAM. . . . I wish now to approve completely your suggestion." Clearly, we are not lacking in spirit, and I am pleased to report to you that this gem comes from one over 80.

Many express apprehension about the basis for selection of members for a new Academy. Nineteen letters expressed the fear that members would be selected who would do nothing more than follow AMA policy. Some feel that no organization really speaks for its membership; 5 or 10 elected officers or full-time employees give their views. A number want to be sure that some people who are scientists and not physicians be included.

On one thing everyone agreed: They themselves were on the go so much there was little time to give to a painstaking analysis of the problem. This is certainly true, but I have evidence in the form of their letters that those who have written me not only are very superior men—tolerant, articulate, thoughtful with charming wit—but have given the problem the attention it deserves. Whether a NAM is formed or not, the material is certainly there to form it. I can tell you that preliminary discussions are now under way. Let us proceed slowly and thoughtfully, but let us proceed.

IRVINE H. PAGE